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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/661,558
Filing Date	September 15, 2003
First Named Inventor	Qingbo Li et al.
Group Art Unit	1753
Examiner Name	Surekha Vathyam
Attorney Docket Number	S053C1

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

AND

☒ Please change the correspondence address for the above-identified application to:

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☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed.

☐ Attorney or agent of record.

SIGNATURE OF Applicant, Assignee of Record, or Attorney of Record

Name, Reg. No.

Joseph Secondine

Signature

Joseph W. Secondine, Jr.

Date

January 6, 2009

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

☐ * Total of _____ forms are submitted.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

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SIGNATURE of Applicant or Assignee of Record

Signature

Name

Joseph Secondine

Date

January 6, 2009

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